

Bulletin

Michigan Department of Community Health

Bulletin Number: MSA 05-57

Distribution: Federally Qualified Health Centers

Hospitals

Local Health Departments

Practitioners

Rural Health Clinics Tribal Health Centers

Issued: October 17, 2005

Subject: Procedure Code Updates

Effective: As indicated

Programs Affected: Medicaid, Children's Special Health Care Services

This bulletin is an alert to procedure codes that are covered by the Michigan Department of Community Health (MDCH). Please note that this notice is distributed to a broad range of providers and not all codes listed may apply to your scope of practice.

Non-institutional providers must bill HCPCS codes Q9945 – Q9957 in place of A4644 – A4647. Outpatient hospital providers must continue to bill HCPCS codes A4644 – A4647.

New Code	Description	Effective date of service
Q4079	Natalizumab Injection	4-1-05
Q9941	IVIG lyophil 1 gm	4-1-05
Q9942	IVIG lyophil 10 mg	4-1-05
Q9943	IVIG non-lyophil 1 gm	4-1-05
Q9944	IVIG non-lyophil 10 mg	4-1-05
Q9945	LOCM <=149 mg/ml iodine, 1 ml	4-1-05
Q9946	LOCM 150 - 199 mg/ml iodine, 1 ml	4-1-05
Q9947	LOCM 200 - 249 mg/ml iodine, 1 ml	4-1-05
Q9948	LOCM 250 - 299 mg/ml iodine, 1 ml	4-1-05
Q9949	LOCM 300 - 349 mg/ml iodine, 1 ml	4-1-05
Q9950	LOCM 350 - 399 mg/ml iodine, 1 ml	4-1-05
Q9951	LOCM >= 400 mg/ml iodine, 1 ml	4-1-05

New Code	Description	Effective date of service
Q9952	Gadolinium-based MR contrast, ml	4-1-05
Q9953	Fe-based MR contrast, ml	4-1-05
Q9955	Perlexane lipid microspheres, per ml	4-1-05
Q9956	Octafluoropropane microspheres, per ml	4-1-05
Q9957	Perflutren lipid microspheres, per ml	4-1-05
90734	Meningococcal conjugate vaccine, serogroups A, C, Y, and W-135 (tetravalent), IM	4-1-05
90714	Td vaccine, preservative free >7, IM	7-1-05
90715	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) 7 years or older	10-1-05

Information regarding 2005 fees and coverage parameters for covered codes is posted on the MDCH website. The website address is www.michigan.gov/mdch >> Providers >> Information for Medicaid Providers >> Provider Specific Information.

Manual Maintenance

Providers may discard this bulletin after review.

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Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved

Paul Reinhart, Director

Medical Services Administration